

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	<i>AC</i>		<i>9/29/00</i>
<b>O.I.P.E. CLASSIFIER</b>			<i>43</i>
<b>FORMALITY REVIEW</b>			<i>10/4/00</i>
<b>RESPONSE FORMALITY REVIEW</b>		<i>65955</i>	<i>10/12</i>

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	<i>11/15/00</i>
2	✓	✓	<i>11/15/00</i>
3	✓	✓	<i>11/15/00</i>
4	✓	✓	<i>11/15/00</i>
5	✓	✓	<i>11/15/00</i>
6	✓	✓	<i>11/15/00</i>
7	✓	✓	<i>11/15/00</i>
8	✓	✓	<i>11/15/00</i>
9	✓	✓	<i>11/15/00</i>
10	✓	✓	<i>11/15/00</i>
11	✓	✓	<i>11/15/00</i>
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If more than 150 claims or 10 actions  
staple additional sheet here

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